IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Docket No. A-62629/RFT/RMS/SJR

Anticipated Classification of this Application:

Class: Subclass:

Prior Application

Examiner: D. Jones

Art Unit: 1616

"EXPRESS MAIL" MAILING LABEL
NUMBER EL 162 335 744 US

DATE OF DEPOSIT February 7, 2000

I HEREBY CERTIFY THAT THIS PAPER OR FEE-IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE "EXPRESS MAIL POST OFFICE TO ADDRESSEE" SERVICE UNDER 37 CFR 1.10 ON THE DATE INDICATED ABOVE AND IS ADDRESSED TO: BOX CPA FEE, ASSISTANT COMMISSIONER FOR PATENTS, WASHINGTON, DC 20231.

TYPED NAME Hammid Sanchez

SIGNED

FEB 11 2000

Box CPA FEE

Assistant Commissioner for Patents

Washington, DC 20231

Sir:

This is a request for filing a Continued Prosecution Application under 37 C.F.R. 1.53(d) of pending application Serial No. <u>08/541,191</u> filed on October 11, 1995 in the name of Jon F. Kayyem, Thomas J. Meade, Scott E. Fraser for CELL-SPECIFIC GENE DELIVERY VEHICLES.

(PLEASE NOTE: FILING OF THIS FORM RESULTS IN AUTOMATIC ABANDONMENT OF THE PARENT APPLICATION. THIS FORM CANNOT BE USED AFTER THE ISSUE FEE IN THE PARENT APPLICATION HAS BEEN PAID.)

- 1. (a) _____ Enclosed is a Small Entity Affidavit.
 - (b) X A Small Entity Affidavit is of record in the prior application.

02/10/2000 DVUONG 00000010 08541191

01 FC:231 345.00 OP 02 FC:202 39.00 OP 03 FC:203 27.00 OP 04 FC:204 130.00 OP 2. _X__ The filing fee is calculated below:

Claims remaining in the application after entry of any amendments under 37 C.F.R. 1.116 unentered in the prior application and less any claims canceled by amendment below:

(C	Col. 1) (Col. 2)	SMALL ENTI:		R THAN A L ENTITY
FOR: NO). FILED NO. EXTRA	RATE FEI	OR <u>RATE</u>	<u>FEE</u>
BASIC FEE		\$34	45 OR	\$690
TOTAL CLAIMS 2	23 -20 = *3	$x09 = $\underline{2}$	27 OR x18	= \$
INDEP CLAIMS	<u>4</u> -3 = * <u>1</u>	x39 = \$3	39 OR x78	= \$
[] MULTIPLE DEPE	ENDENT CLAIM PRESENTED	+130 = \$ <u>13</u>	30 OR <u>+260</u>	= \$
*If the difference than zero, enter	ce in Col. 1 is less "0" in Col. 2.	TOTAL \$	OR TOT	AL \$

- 3. X The Commissioner is hereby authorized to charge any additional fees which may be required, including extension fees, or credit any overpayment to Deposit Account No. 06-1300(Order No. A-62629/RFT/RMS/SJR)
- 4. X Our check in the amount of \$\frac{1221.00}{1291.00}\$ (\$680.00 for 4 Month Extension of Time and \$541.00 for Filing Fees) is enclosed.
- 5. _____ Cancel in this application original claims ______ of the prior application before calculating the filing fee. (At least one independent claim must be retained for filing purposes.)
- 6. _____ Enter the amendments under 37 C.F.R. 1.116 filed on _____ unentered in the prior application.
- 7. ____ Formal drawings to be substituted for the informal drawings filed with the prior application are enclosed.
- 8. A preliminary amendment is enclosed. (Claims added by this amendment have been properly numbered consecutively beginning with the number next following the highest numbered original claim in the prior application.)

9.	 A supplemental declaration is enclosed. The Supplemental Declaration does not include the following previously listed inventor(s):
	Please delete this name(s) because the person(s) is not an inventor of the presently claimed invention.

Date: <u>Feb 7, 200</u>0

Signature

Robin M. Silva

Reg. No. 38,304

Reg. No. 44,312

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